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ABSTRACT

This paper describes three interrelated studies which investigated the cognitions, feelings, and motives involved in the emergence and progression of prosocial behaviors. The first study examined the child's emerging sensitivities to the affective events in his environment through data collected over a 9-month period from groups of 10-, 15-, and 20-month-old infants. The infants' responses to affective events were recorded daily by their mothers and at 3-week intervals by home visitors. The second and third studies investigated (1) the relationship between perspective-taking skills and prosocial behavior, (2) the frequency, circumstances, and generality with which prosocial behaviors occur, and (3) the relationship between prosocial and antisocial behavior. Standard experimental situations were used to test a group of 3- to 7-year-olds on their perspective-taking skills and prosocial interventions. Observations in the children's natural play settings were used to record prosocial and aggressive interchanges and to measure social activity level. The results indicated that even very young children were able to discriminate between affective events and be responsive to the needs of others. No overall relation was found between perspective-taking abilities and prosocial behaviors at any age level. The findings with regard to prosocial behaviors and aggression were mixed. (JMB)

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The Emergence and Functions of Prosocial Behaviors in Young Children

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The Emergence and Functions of Prosocial Behaviors in Young Children

The study of children's compassionate feelings and behaviors comprises a complex package for research. Compassion, altruism, prosocial behavior (the label is a problem) involve cognitions, principles, and judgments; they involve feelings and motives. We are well aware that not all of helping, sharing, and sympathizing arise out of identification with the feelings of or concern for the welfare of others, and aware that the phenomena of empathy, compassion, etc. are murky areas--philosophically and empirically. Despite this state of affairs, our research interest is in how compassion (concern for others) is born and bred. Our earlier research used experimental designs with nursery school children. We demonstrated differential changes in prosocial responding as a consequence of different types of modeling and reinforcement. Although these techniques increased the frequency of helping and sympathy (though increase was by no means assured), the helping response was expressed in such a variety of ways as to suggest very different meanings and feelings underlying the response.

The direction of our research program, therefore, shifted to the exploration of the phenomena of compassionate feelings and behaviors more generally. What are the precursors of prosocial inclinations and the very early capabilities of the child in this regard? To get a better grasp of these issues, it seemed important to explore more general questions about the inferential capabilities of young children, of very, very young children, inferences with regard to the affect and thoughts of others. With this kind of knowledge we could more readily ask, how does sensitivity

and responsiveness to the needs of others develop? Where and how do they fit into a more general schema of the developing child, both with respect to his cognitive skills and his social behavior?

From three interrelated studies we are attempting to obtain a picture of the emergence and progression of prosocial behaviors, to investigate the cognitions, feelings, and motives involved. The subjects were 128 children, ranging in age from 10 months to 7 years.

In the first study, with the youngest children, the focus is on the child's emerging sensitivities to affective events in his environment, e.g., a parent's or child's anger or pain or fear or joy or anxiety. Our data are the child's responses to these events and, in turn, responses of others to the child. Three cohorts, of eight children each, were followed for 9 months; the youngest began at 10 months of age, the next cohort at 15 months, and the third cohort at 20 months. Mothers were trained to dictate detailed descriptions of day to day affective events. At three week intervals, investigators visited the home and simulated affective episodes (e.g., pain, anger, joy). Additional data were obtained on the child's development and the home environment.

The second and third studies began at age 3 with children in nursery school or coming back to the school setting for research purposes. Our purposes were (a) to investigate the development and relations of perspective-taking skills and prosocial behavior; and (b) to investigate the prosocial behavior in the life space of the child: the frequency, circumstances, and generality with which it occurs and its relation to its "opposite," "anti-social" behavior.

Through a battery of standard situations, we assessed the child's perspective-taking skills: That is, was the child able to recognize and identify correctly the perspective of the person in circumstances in which an object or event was encountered or experienced differently by the two of them? One set of tasks dealt with literal perspectives in a visual or tactile perceptual sense; a second set dealt with what we will call cognitive perspectives in the sense of comprehending self-other perspectives deriving from long-term differences in life experiences; and a third set dealt with affective perspective-taking. An example of each follows. Some of the tasks are adapted from Flavell; others are new. An example of literal perceptions is one with a child and another person seated on opposite sides of a table. Can the child indicate that a picture or object appearing upside-down to him would be viewed as right side up to the Other, and vice versa? A cognitive perspective-taking task is illustrated by requesting the child to choose gifts for parents and opposite sex peer and for himself. Does his own preference pervade his choices? Emotional perspective-taking was tapped by the child's inability to differentiate between his own and another's immediate affective experiences in situations in which S experienced success and O, failure; S experienced pleasure with one object, but O experienced pleasure with a different object.

Prosocial behaviors (a child's potential helping, sharing, and comforting) were assessed in a series of 6 standard situations. On two occasions an adult accidentally spilled some materials in the context of play activities. In two other circumstances, there were limited supplies of snack or toys which might be shared. The child also had occasion to witness someone expressing pain (slamming her finger in a drawer) and to

see and hear someone crying, ostensibly about a sad story. All of the experimental tasks were interwoven in meaningful contexts of play and interaction. In natural indoor and outdoor play settings, prosocial and aggressive interchanges were recorded. A measure of level of social activity was also obtained.

Our infant subjects supplied very provocative data on sensitivity to affective states of others. Responses were by no means universal. However, very young children were often finely discriminative and responsive to others' need states. Children in the youngest cohort showed distress to parental arguments and anger with each other. Responses were sometimes marked: crying, holding hands over ears, comforting a distraught parent, or (punitively) hitting the parent perceived as the guilty one. Parental affection toward each other was equally arousing: Children of 1 to 2½ years tried to join in or to separate the parents--even kicking the mother's leg. One child, from 15 months to 2 years, showed consistently different responses depending on whether mother or father initiated the affectionage hug or kiss. Initiation by the mother aroused no affect in the child, whereas with the father's (or grandfather's) initiation toward the mother, the child would "fall apart" (hitting, glaring, sucking her thumb).

While in the youngest children others' crying tended to elicit contagious crying as well as amusement, crying began to decrease, and as it waned, it was replaced by serious or worried attending. Around one year most of the youngest cohort first showed comfort to a person crying or in pain by patting, hugging, or presenting an object. Among 1½ and 2-year-olds comforting was sometimes sophisticated and elaborate, e.g., fixing the hurt by trying to put a band-aid on, covering mother with a blanket when

she was resting, trying to locate the source of the difficulty. Children also began to express concern verbally, and sometimes gave suggestions about how to deal with the problem. Such precocity on the part of the very young gives one pause. The capabilities for compassion, for various kinds of reaching out to others in a giving sense are viable and effective responses early in life. How such behaviors develop and change in the process of socialization in various cultures and sub-cultures are issues to which science has addressed little investigation.

Lest one assume that we are ready to reformulate a theory about the innate goodness of man, it should be emphasized too that there were also many, many occasions on which benevolence was not forthcoming, and that early aggressions are equally impressive.

If by egocentric one means the translation of the environment in terms of one's own needs and body state in the face of different existing states of others, the data provide such evidence--namely, the child who tries to protect his own possessions when another child is being "robbed" or his, or the child who examines his own old injuries, hurts, etc. when someone else is injured, or verbal self-references--"look at my boo-boo"--as mother ministers to the real needs of an injured child. But the interesting point is that such self-references and self-considerations which have characteristically been conceptualized as the child's inability to take the point of view of the other, or preoccupation with one's own need state, may at times have a quite different function. They may also represent active attempts to comprehend (to form hypotheses about) others' affects by "trying them on," in this way trying to master (act positively on) the feelings in themselves which are aroused by others' affects.

Support for such an idea is found in our data where it is not uncommon to observe self-referential responses followed by compassionate responses.

In our studies of 3 to 7 year olds, as described earlier, we explored children's perspective-taking (lateral physical and psychological) in relation to their helping, sharing, and comforting behaviors. The children's abilities to successfully deal with another's perspective on the perceptual and cognitive tasks increased with age, the most substantial jumps occurring between 4½ and 5 years of age. The prosocial behaviors by the same children showed no systematic developmental changes. Not surprisingly, then, there was no overall relation between perspective-taking abilities and prosocial interventions. This was true also at each given age level.

We expected the two kinds of responding to be related, since both (we assume) involve the capacity to make an inference about someone else's differential experience. Prosocial responding involves also the motivation to act on someone else's behalf. The lack of correspondence was of two kinds: children who succeeded on perspective-taking tests but did not respond prosocially, and children who helped, shared, or comforted, but failed on the perspective-taking tasks. This lack of correspondence raises a number of unsettling questions: Is the conceptualization of a common underlying process of perspective-taking incorrect or simplistic? Are the test-tasks that are presumed to measure self-other perspectives really not measuring these abilities well? Perhaps, especially in young children, the language components in the instructions may have an all-determining influence. In designing perspective-taking tasks for this study and in examining tasks that other investigators have used, we have become very aware of the

difficulties in good task-construction. We have the strong impression that the child's capabilities are seriously underestimated by many experimental tasks assessing self-other perspectives.

Our third study extended our information to the functioning of these same children in their peer groups. With what frequency and consistency do they help, share, and comfort? How do these prosocial behaviors relate to aggressive peer interaction?

Prosocial behaviors occurred in almost every child. There was some consistency in relative frequency across natural and experimental settings in sharing and comforting responses. Sharing and comforting were significantly related to each other; neither was reliably associated with helping. Such data provide evidence of limited consistency in behaviors that involve sensitivity to others' feeling states. The relatively impersonal utilitarian "helping" of an inconvenienced person (as measured in our study) seems to tap a different kind of behavior from that involved in responding to the emotional needs, as in reacting to hurt or sadness. The data suggest that prosociality is not a unitary concept. Observations of responding to emotional states of others (here to sadness) documented the complexity in prosocial interventions. Our data indicate that merely tabbing a child as having (or not) shared or comforted another ignores significant variants in these responses: inhibitions, approach-avoidance conflicts, anxieties, sympathy, feelings of relief, success or satisfaction.

Compassion and aggression have long been positively linked in some psychological theories, but data are few. In the present study there were no simple relations between aggressive and prosocial behaviors. There was a single significant positive association (out of 8) only for girls. When level of social interaction is controlled, the significance disappears.

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Associations between aggression and prosociality were re-examined, taking into account the absolute level of aggression. We reasoned that children with high frequencies of aggressive acts might be expressing qualitative as well as quantitative differences in aggression, e.g., hostile vs. assertive aggression. The sample was divided, therefore, at the mean on frequency of aggression and correlations were computed for each subsample, and data for boys and girls examined separately.

For boys below the mean on aggression, there was a significant positive association between aggression and sharing-comforting in peer interaction. In contrast, for boys above the mean on aggression the relation was negative. For girls, there was no such pattern. However, since the absolute level of aggression of girls is significantly lower than that of boys, the correlation between aggression and comforting-sharing for girls across the entire range of aggression is consistent with the findings for boys at the lower range of aggression. Controlling on level of social interaction did not materially alter the findings. One might hypothesize that moderately aggressive children are assertive more than hostile and that they are secure and competent in their peer groups. Assertiveness is a quality that might reasonably be expected to go along with the ability to intervene on behalf of another person.

These analyses have emphasized the aggressive behavior expressed by the child. There is another element of aggression, that expressed to the child. Among the boys and girls who were low to moderate in exhibited aggression, frequency of being the target of aggression and frequency of sharing-comforting behaviors were significantly positively related. In other words, among the relatively non-aggressive children, sensitivity to

others' feeling states increased as the frequency of experiences of aggression from others increased. There was no such relation among children high on exhibited aggression. We will hazard a hypothesis: namely, aggressions experienced may contribute to the development of sensitivity to feelings when the child is himself not highly vulnerable and is secure in his relations with others. He may be able to learn from experiencing aggression from others and better understand the feelings and be better able to act empathically.

There is still a very modest accumulation of scientific knowledge regarding the human behaviors that qualify as prosocial. They are not a simple phenomenon. As scientists, we tend to give too little thought to cultural influences on the choice and definition of our research problems. It seems to us that research on prosocial behavior carries many overtones of these influences. In our society, the study of prosocial endeavors has been rather late in coming, compared with studies of aggression (and problems in our society), and compared with individual achievement and intellectual capacities, valued commodities by the society. Theories of prosociality, too, have frequently been formulated with materialistic or economic parallels, for example, cost-accounting theory, which represents a balancing of credit-debit ledgers of human relations. We are suggesting that it might be well to reflect more on our research emphases and theories of child development as products of the cultures and subcultures from which we come.